

SEAFARERS' INTERNATIONAL UNION

(PLEASE PRINT IN BLOCK LETTERS)

APPLICATION FOR MEMBERSHIP

Name

.....
NAME OF COMPANY

S.I.N. _ _ _ - _ _ _ - _ _ _

ADDRESS.....
Employee's work location
(Name of ship)

Phone No.:(.....).....
Area Code

Date

Address

I hereby request and accept membership in the Seafarers' International Union and promise to abide by the By-Laws and Constitution of the Union. In applying for a membership I understand that the Union intends to apply to be certified as my exclusive bargaining agent and to represent me in collective bargaining.

.....
City **Province**

.....
Postal Code

X

Applicant's Signature

**Hand over to a S.I.U. organizer or
remove sealing strip, enclose \$5.00 cheque,
fold and mail to S.I.U. Headquarters.**

X

Witness' Signature (if possible)

